Effective October 1, 2003							10/5/03/0							
		CL	AIMS /		D - PART	ī		s	MALL	ENTITY		OTHE	R THA	N.
	CTAL CLAWA			(Colu	mn 1)	<u>(Co</u>	lumn 21	7	YPE		OF	SMALI		
	TOTAL CLAIM	<u> </u>				<u> </u>		1 [	RATE	FEE		RATE	FE	
f	OR	••		NUMB	NUMBER FILED NUMBER EX			6	ASIC FE	Ε	OF	BASIC FE	1900	)
1	OTAL CHARGEABLE CLAIMS			6	minus 20=	• .	:	1. [	XS 9=		OR	XS18=		
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V	ULTIPLE DEPE	NDENT	CLAIM	PRESENT					-145=	1	OR		<del>                                     </del>	
:	f the differenc	e iu cop	umn 1 is	s less than	zero, enter	<b>"0"</b> in	column 2	L	TOTAL	+	<b>-</b>	TOTAL	Dia	4
	(	CLAIM	S AS	AMENDI	ED - PAR'	T (I				<b></b>		OTHER	THAN	
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			ımn 1)	· .	(Colum		(Column 3)	ADI	TOTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE		
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